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NOTICE OF FILING / CLAIM FEE(S) DUE  
(CANCELLATION SHEET)

APPLICATION NUMBER: 09/680126

Total Filing Fees Due:

Fee Type	Amount	Fee Type	Amount
Filing Fee	<u>20</u>	—	<u>690</u>
Examiner Fee	<u>5</u>	—	<u>690</u>
Issue Date Fee	<u>78</u>	—	<u>156</u>
Priority	—	—	—
Express Filing	—	—	<u>130</u>
<b>Total Filing Fees Due:</b>			<u>976</u>

Fee Type: Filing Fee Due:

Total Filing Fees Due: 976.00

Total Filing Fees Collected: 40

BALANCE DUE: 976.00

Sally Ode  
Office of Legal Patent Examiners

1025A ODE, RAN-01 (Rev. 12/77)